| TITL | EX | ΙX    | RF   | E P  | O R  | т    | 0 F  | . Е | Х   | P   | E : | N D | I | Т | U | R I | ES |
|------|----|-------|------|------|------|------|------|-----|-----|-----|-----|-----|---|---|---|-----|----|
|      |    |       | (B)  | r ca | ATEG | ORY  | OF   | SER | VI: | CE) |     |     |   |   |   |     |    |
|      |    | (FIS) | CAT. | VTI  | n TO | TAL: | 2 69 | OF  | 1:  | 2/3 | 1/  | 071 |   |   |   |     |    |

IOWA DEPARTMENT OF HUMAN SERVICES

1,375,532

143.405

83,901

15.053

58.027

3,857

14,930

13.616

54,709

92,405

28,195

742,564

71.219

205,131

161,334

166,401

74,941

83.847

27.727

4,733

11,761

30.442

11,918

103.490

2,750

- 0

10

16

1.724.083

2,165,475

6,029

n

- 0

n

0

1,988,539

132.343

147,035

279.331

1.656.213

62,758

10,370

55,218

92.271

28,195

71.219

541

- 0

3.5

186

742,540

283,326

168.427

79,431

104.847

36,456

144,345

294.899

36.047

333,580

78.133

23,317

3.917.927

10,184,621

1,724,061

1,295,975

1.953.970

14.771

п

Π

Π

. .

MEDICAID MANAGEMENT INFORMATION SYSTEM

PAGE

RUN DATE 12/29/07

TOTAL.

PAYMENT

\$157,379,776.95

\$93.335.364.77

\$12,141,096.23

\$220.997.332.51

\$130,171,961,56

\$1,789,255.83

\$55.416.203.16

\$93,783,765.77

\$16,966,180.32

\$2,501,259.46

\$12,814,176.98

\$19,301,272.84

\$3,322,667.73

\$1,727,857.89

\$7,250,947.02

\$4,148,262.97

\$50,996,326.78

\$7,378,172,43

\$4,379,001.37

\$1,485,080.00

\$3.367.219.81 \$21,653,675.22

\$8,336,772.77

\$24,231,657.55

\$4,349,947.36

\$2.612.568.84

\$1,085,566,46

\$1,745,851.09

\$8,063,846.41

\$1,094,250,36

\$2,575,248.03

\$1,706,048,64

\$236,847.12

\$142,860,862.56

\$17,641.76

\$1,416.37

\$6,946.98

\$0.00

\$105,591,103.64

\$229,370.27

\$15,679.93

\$0.00

\$0.00

\$0.00

\$0.00

\$0.52-

\$0.00

\$0.00

sn.nn

\$63.14

1

IAMM2200-R003 (MR-0-12)

AS OF 12/31/07

PHYSICIAN

CLINIC SERVICES

MEP CASE MANAGEMENT

LAB AND RADIOLOGICAL

HABILITATION SERVICES

REHAB SUPPORT SERVICES

LOCAL EDUCATION AGENCY

EARLY ACCESS SERVICES

INDIAN HEALTH SERVICES

FAMILY PLANNING SERVICES

MANAGED SUBSTANCE ABUSE

MENTAL HEALTH ACCESS PLAN

HEALTH INS PREMIUM PAYMENT

TREATMENT FOSTER FAMILY CARE

PHYSICAL DISABILITIES SVCS

BRAIN INJ WAIVER SERVICES

RESIDENTIAL CARE FACILITY

CHILDRENS MENTAL HEALTH SVC

FAMILY CENTERED PROGRAM

GROUP TREATMENT THERAPY

REMEDIAL SERVICES

AMBULANCE SERVICES

PRESCRIBED DRUGS

DRUG CAPITATION

IOWA PLAN PROGRAM

EPSDT SCREENING

PATTENT MANAGEMENT

MEDICAL SUPPLIES

OTHER PRACTITIONER

FAMILY PRESERVATION

HMO SERVICES

DENTAL

OPTOMETRIST

PSYCHIATRIC

MR WAIVER SERVICE

AIDS WAIVER SERVICES

PODIATRIC

CHIROPRACTIC

CATEGORY OF SERVICE RECIPIENTS NUMBER OF UNITS OF SERVED CLAIMS SERVICE TNPATTENT 29,962 231,063 39,146 OUTPATIENT 164,055 483,212 4.337.844 CHILD PART HOSP ο.

Π Π CHILD DAY TREATMENT 1 0 - 0

2,584 4,493 56,796

ADULT PART HOSP ADULT DAY TREATMENT SKILLED NURSING FACILITY INTERMEDIATE CARE FACILITY 16.056 79.811 2.299.278 INTER CARE MENTAL RETARDA 2,233 13,068 387,190

254,078

56,756

44,037

2,535

7.912

2,651

9,976

2,700

1,067

n

. .

n

232,784

23.750

60.824

161,348

6,174

5.898

43,595

40,201

99,653

52,284

20.274

13.397

1,015

8,134

2,321

10,255

500

51

727

50

0

8

13

373,779

0

44 225 6,705

NURSING FAC FOR MENTAL ILL HOME HEALTH 89.537 1.535.894

24,267

40 41 41

LEAD INSPECTION AGENCY

| IAM | M22 | 00-R003  | (MR-O-12) |
|-----|-----|----------|-----------|
| AS  | OF  | 12/31/07 |           |

\* ALL CATEGORIES \*

MEP SERVICES

UNASSIGNED

## IOWA DEPARTMENT OF HUMAN SERVICES MEDICAID MANAGEMENT INFORMATION SYSTEM

PAGE 2 RUN DATE 12/29/07

> TOTAL PAYMENT \$31,900,277.14 \$10,068,561.03

\$16,115,666.45

\$1,286,389,028.61

\$1,235,977.63

\$0.00

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YIT TOTALS AS OF 12/31/07)

62,161 2

443,182 8,424,612 37,979,339 \*\*\* END OF REPORT \*\*\*

65,695

13-

| CATEGORY OF SERVICE           | RECIPIENTS<br>SERVED | NUMBER OF<br>CLAIMS | UNITS OF<br>SERVICE |  |
|-------------------------------|----------------------|---------------------|---------------------|--|
| ELDERLY WAIVER SERVICES       | 10,631               | 155,602             | 2,471,936           |  |
| ILL & HANDICAPPED WAIVER SVCS | 2,523                | 19,274              | 645,983             |  |
| COUNTY OFFICE REIMBURSEMENT   | 0                    | 0                   | 0                   |  |

11,304

204